## DIVISION OF MINING, LAND AND WATER WATER RESOURCES SECTION



www.dnr.state.ak.us/mlw/water/index.htm

For ADNR Use Only TWUP #	Fax: (907) 586-2954 For ADNR Use Only CID #	For ADNR Use Only Receipt Type WR	
(907) 269-8600 Fax: (907) 269-8947	Juneau, AK 99811-1020 (907) 465-3400	(907) 451-2790 Fax: (907) 451-2703	
Anchorage, AK 99501-3562	400 Willoughby Avenue	Fairbanks, AK 99709-4699	-
550 West 7 <sup>th</sup> Avenue, Suite 1020	PO Box 111020	3700 Airport Way	Date/Time Stamp
Anchorage Office	Juneau Office	Fairbanks Office	For ADNR Use Only

#### APPLICATION FOR TEMPORARY USE OF WATER

#### **INSTRUCTIONS**

- 1. Complete one application for each project including up to five water sources (incomplete applications will not be accepted).
- 2. Attach legible map that includes meridian, township, range, and section lines such as a USGS topographical quadrangle or subdivision plat. Indicate water withdrawal point(s), location(s) of water use, and point(s) of return flow or discharge (if applicable).
- 3. Attach sketch, photos, plans of water system, or project description (if applicable).
- 4. Attach driller's well log for drilled wells (if available).
- 5. Attach copy of ADNR fish habitat permit (if applicable).
- 6. Attach completed Coastal Project Questionnaire (if applicable see page 4).
- 7. Submit non-refundable fee (see page 4).

APPLICANT INFORMATION				
ALL LICANT IIN CHWATTON				
Project Name				<del></del>
Organization Name (if applicable)		Agent or Consultant N	ame (if applicable	5)
Individual Name (if applicable)		Individual Co-applican	t Name (if applica	able)
Mailing Address	City		State	Zip Code
Daytime Phone Number	<del>-</del>	Alternate Phone Numl	per (optional)	
Fax Number (if available)		E-Mail Address (option	nal)	

PROPERTY DESCRIPTIONS								
Location of	f Water Use							
		range, place name, survey per)	Meridian	Township	Range	Section	Quarter 9	Sections
							1/4	1/4
							1/4	1/4
	f Water Source	to a Doods on Mall Doodle	NA - wielie w	T	D	041	0	2 1
Geog	rapnic Name of vva	ter Body or Well Depth	Meridian	Township	Range	Section	Quarter	Sections
							1/4	1/4
							1/4	1/4
							1/4	1/4
							1/4	1/4
Lagation	( Motor Deturn Fla	or Diochorae (if omnlie	ahla)				1/4	1/4
Location of Water Return Flow or Discharge (if applicable)Geographic Name of Water Body or Well DepthMeridianTownshipRangeSectionQuarter Sections								
Geog	Taphic Name of Wa	tier Body or Well Deptil	Wendan	TOWNSHIP	Range	Section	Quarter	Sections
							1/4	1/4
							1/4	1/4
METHOD C	OF TAKING WATE	7						
Pump	Pump Intake	Inches	Hours Workin	a	Houre/F	Jav		
i unip	Pump Output		Length of Pip				o point of u	use)
Gravity	Pipe Diameter	Inches	Length of Pip	e	_ Feet (ta	ike point to	point of u	se)
	Head	_ Feet						
Ditch								
	LH	W Feet	Diversion Ra	ate	🗆 G	PM or 🗆	CFS	
Reservoir		\\\\ \	Materia Of		A =	-1		
	LH	W Feet	Water Storag	je	Acre-te	et		
Dam	LH	W Feet	Water Storag	je	Acre-fe	eet		

Purpose of Water Use	Q	uantity of Wate	er	Seaso	on of Use
	Maximum Withdrawal Rate	Total Daily Amount	Total Seasonal Amount	Date Work Will Start	Date Work Will be Completed
	Project Totals			Total years needed	l:
PROJECT DESCRIPTION					
What alternative water sources because of water shortage or p			d a portion of y	our requested diversi	on be excluded
Are there any surface water bo yes, list any ground water mon n the area, and any information	itoring programs go	ing on at or nea			
Briefly describe the type and si equipment uses or holds.	ze of equipment us	ed to withdraw a	and transport w	ater, including the an	nount of water the
Briefly describe what changes construction or operation of you					
Briefly describe land use aroun residential).	nd the water take, us	se, and return fl	ow points (e.g.	national park, recreat	tional site,
Will project be worked in phase	es? State reason fo	or completion da	te.		
Briefly describe your entire pro	ject:				

11 AAC 93.220 sets out the required information on the application and authorizes the department to consider any other information needed to process an application for a temporary use of water. This information is made a part of the state public water records and becomes public information under AS 40.25.110 and 40.25.120. Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached. False statements made in an application for a benefit are punishable under AS 11.56.210.

SIGNATURE	
The information presented in this application is true and correct to the bright or priority is established per 11 AAC 93.210-220, that the water us that a temporary water use authorization may be revoked if necessary to public interest.	sed remains subject to appropriation by others, and
Signature	Date
Name (please print)	Title (if applicable)

#### REFERENCES

#### **Measurement Units**

GPD = gallons per day

CFS = cubic feet per second

GPM = gallons per minute

AF = acre-feet

AFY = acre-feet per year (325,851 gallons/year)

AFD = acre-feet per day (325,851 gallons/day)

MGD = million gallons per day

#### **Conversion Table**

5,000 GPD=	30,000 GPD=	100,000 GPD=	500,000 GPD=	1,000,000 GPD=
0.01 CFS	0.05 CFS	0.2 CFS	0.8 CFS	1.5 CFS
3.47 GPM	20.83 GPM	69.4 GPM	347. 2 GPM	694.4 GPM
5.60 AFY	33.60 AFY	112.0 AFY	560.1 AFY	1120.1 AFY
0.2 AFD	0.09 AFD	0.3 AFD	1.5 AFD	3.1 AFD
0.01 MGD	0.03 MGD	0.1 MGD	0.5 MGD	1.0 MGD

#### Fee required by regulation 11 AAC 05.010(a)(8)

• \$350 for all uses of water from up to five water sources Make checks payable to "Department of Natural Resources".

#### Coastal Zone

If this appropriation is within the Coastal Zone, and you are planning to use more than 1,000 GPD from a surface water source or 5,000 GPD from a subsurface water source, you need to submit a completed Coastal Project Questionnaire with this application. For more information on the Coastal Zone, contact the Office of Project Management and Permitting; Anchorage 269-7470, Juneau 465-3562, www.dnr.state.ak.us/acmp/.

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- 7. Submit non-refundable fee (see page 4).

APPLICANT INFORMATION					
Otter Creek Oil Spill					
Project Name					
Tesoro Alaska Company					
Organization Name (if applicable)		Agent or Consultant Name	e (if applicable	e)	
John Kwietniak					
Individual Name (if applicable)		Individual Co-applicant Name (if applicable)			
54741 Tesoro Rd Kenai, AK 99611					
Mailing Address	City		State	Zip Code	
(907) 776-3569		(907)399-4321			
Daytime Phone Number		Alternate Phone Number	(optional)		
(907) 776-3812		jkwietniak@tesoropetroleum.com			
Fax Number (if available)		E-Mail Address (optional)			

PROPERTY DESCRIPTIONS								
Location of Water Use								
Project Area (e.g. milepost range, place name, survey number)	Meridian	Township	Range	Section	Qua	rter S	Sectio	ns
Tesoro pipeline otter creek crossing	Seward	9N	9W	14	7	1/4	2	1/4
						1/4		1/4
Location of Water Source		T						
Geographic Name of Water Body or Well Depth	Meridian	Township	Range	Section	Qua	rter S	Sectio	ns
Otter Creek	Seward	9N	9W	14	7	1/4	2	1/4
						1/4		1/4
						1/4		1/4
						1/4		1/4
						1/4		1/4
Location of Water Return Flow or Discharge (if applicable	e)							
Geographic Name of Water Body or Well Depth	Meridian	Township	Range	Section	Qua	rter	Sectio	ns
						1/4		1/4
						1/4		1/4
				•	•			

METHOD (	OF TAKING WATER		
Pump	Pump Intake 12 Inches Pump Output 1.25 GPM	Hours Working $\frac{10}{50}$ Length of Pipe $\frac{50}{100}$	_ Hours/Day _ Feet (from pump to point of use)
Gravity	Pipe Diameter Inches Head Feet	Length of Pipe	_ Feet (take point to point of use)
Ditch	L <u>20</u> H <u>5</u> W <u>5</u> Feet	Diversion Rate 6	☑ GPM or □ CFS
Reservoir	LHWFeet	Water Storage	Acre-feet
Dam	L H W Feet	Water Storage	Acre-feet

Purpose of Water Use	G	Quantity of Wat	er	Season of Use		
	Maximum Withdrawal Rate	Total Daily Amount	Total Seasonal Amount	Date Work Will Start	Date Work Will be Completed	
oil spill cleanup activities	75 gal/hr	750 gal	67500 gal	8/1/05	9/30/05	
	Project Totals	750	67500	Total years needed:	0.3	

#### PROJECT DESCRIPTION

What alternative water sources are available to your project should a portion of your requested diversion be excluded because of water shortage or public interest concerns?

#### Rain water? Well?

Are there any surface water bodies or water wells at or near your site(s) that could be affected by the proposed activity? If yes, list any ground water monitoring programs going on at or near the sites, any water shortages or water quality problems in the area, and any information about the water table, if known.

#### No.

Briefly describe the type and size of equipment used to withdraw and transport water, including the amount of water the equipment uses or holds.

Submersible water pump. Water will not be transported. It will be hosed directly from pump.

Briefly describe what changes at the project site and surrounding area will occur or are likely to occur because of construction or operation of your project (e.g. public access, streambed alteration, trenching, grading, excavation).

Streambed alteration and diversion because of construction of a ditch from which to pump sufficient water.

Briefly describe land use around the water take, use, and return flow points (e.g. national park, recreational site, residential).

#### State owned land

Will project be worked in phases? State reason for completion date.

No, the oil will be recovered as quickly as possible.

#### Briefly describe your entire project:

Activities associated with the Otter Creek oil spill will include ditch construction for water storage and accumulation. The stream will most likely be diverted in order to work solely on the affected area and minimize impact to the original streambed.

(Attach extra page if needed.)

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SIGNATURE	
right or priority is established per 11 AAC 93.210-220, tha	orrect to the best of my knowledge. I understand that no water the water used remains subject to appropriation by others, and if necessary to protect the water rights of other persons or the
	7/28
Signature	Date
John Kwietniak	Incident Commander

Title (if applicable)

#### REFERENCES

Name (please print)

#### **Measurement Units**

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# Additional Instructions Page: ADNR Temporary Water Use Approval

By clicking on the i, you've reached this instructional page. Here you can find special instructions on individual text fields.

Page 2: Quarter Sections—these will be aliquot parts instead of numbers.

### **More Information on this Form**

When do you need this form?

Activities associated with any temporary water source on state lands will require this form.

Who fills out this form?

A permitter with the Responsible Party

Who signs this form?

The Incident Commander

Where does this form get delivered?

The application can be delivered to: 550 W. 7<sup>th</sup> Ave. Anchorage, AK 99501